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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND, BALTIMORE DIVISION		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filling

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Brianna First name Alexandria Middle name	First name Middle name	
	Bring your picture identification to your meeting with the trustee.	Stevenson	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1347		

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	4148 Mountwood Rd Apt 4	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code Baltimore City	Number, Street, City, State & ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Del	otor 1 Stevenson, Briani	na Alexandria			Case number (if known)			
Par 7.	Tell the Court About \ The chapter of the			h, see <i>Notice Required b</i>	by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form		
	Bankruptcy Code you are choosing to file under		2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to me under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how yo	u may pay. Typically, i ey is submitting your p	f you are paying the fee y	neck with the clerk's office in your local court for more detail yourself, you may pay with cash, cashier's check, or money our attorney may pay with a credit card or check with a			
			y the fee in installme Installments (Official F		otion, sign and attach the Application for Individuals to Pay	The		
		not required t	o, waive your fee, and ze and you are unable	may do so only if your into pay the fee in installm	tion only if you are filing for Chapter 7. By law, a judge may, come is less than 150% of the official poverty line that applients). If you choose this option, you must fill out the <i>Applica</i> BB) and file it with your petition.	ies to		
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
	,	District		When	Case number			
		District		When	Case number			
		District		When	Case number			
10.	Are any bankruptcy cases	■ No						
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debtor			Relationship to you			
		District	-	When	Case number, if known			
		Debtor			Relationship to you			
		District		When	Case number, if known			
11.	Do you rent your residence?	□ No. Go to	line 12.					

Has your landlord obtained an eviction judgment against you?

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

No. Go to line 12.

Yes.

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Den	Stevenson, Briani	na Alexa	naria		Case number (# known)		
Par	Report About Any Bus	sinesses `	ou Own	as a Sole Propriet	etor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.				
		☐ Yes.	Name	and location of bus	usiness		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, Sta	tate & ZIP Code		
	to this petition.		Chec	k the appropriate bo	box to describe your business:		
				Health Care Busin	siness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))		
				Commodity Broke	ker (as defined in 11 U.S.C. § 101(6))		
				None of the above	ve		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approdeadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stateme operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proce U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am r	not filing under Cha	apter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	ny Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?			
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
	- ,				Number, Street, City, State & Zip Code		

Debtor 1 Stevenson, Brianna Alexandria

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Stevenson, Briani	na Alexan	dria	Case	number (if known)		
Part	6: Answer These Question	ons for Rep	orting Purposes				
16.	What kind of debts do you have?			nsumer debts? Consumer debts ar nal, family, or household purpose."	ner debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an imily, or household purpose."		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily bu for a business or investment o	siness debts? Business debts are or through the operation of the busine	debts that you incurred to obtain money ses or investment.		
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you ow	e that are not consumer debts or bus	siness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			o you estimate that after any exempt e to distribute to unsecured creditors	property is excluded and administrative expenses ?	are	
	administrative expenses are paid that funds will be		■ No				
	available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	n 🗖 \$10,000,000,001 - \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	n		
Part	7: Sign Below						
For	you	I have exa	nined this petition, and I decla	re under penalty of perjury that the in	formation provided is true and correct.		
				I am aware that I may proceed, if eable under each chapter, and I choose	eligible, under Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.	Unite	
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this have obtained and read the notice required by 11 U.S.C. § 342(b).				s not an attorney to help me fill out this document,	I	
		I request r	elief in accordance with the cl	hapter of title 11, United States Cod	le, specified in this petition.		
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 151 /s/ Brianna Alexandria Stevenson							
			Alexandria Stevenson of Debtor 1	Signature of	f Debtor 2	_	
		Executed of	November 20, 2018 MM / DD / YYYY	Executed on	MM / DD / YYYY		

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Debtor 1	Stevenson,	Brianna	Alexandria
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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Janine Scott	Date	November 20, 2018	
Signature of Attorney for Debtor		MM / DD / YYYY	
Janine Scott			
Printed name			
Legal Aid Bureau, Inc			
Firm name			
29 W Susquehanna Ave Ste 305			
Towson, MD 21204-5217			
Number, Street, City, State & ZIP Code			
Contact phase (440) 427 4940	Empil oddrood	is sett@mdlab.org	
Contact phone (410) 427-1810	Email address	jscott@mdlab.org	
25662			
Bar number & State			

	Fill in this	information to ident	ify your case:					
De	btor 1	Brianna Alexan						
 	btor 2	First Name	Middle Name	١	ast Name			
1 -	ouse if, filing)	First Name	Middle Name	1	ast Name			
Un	ited States Ban	kruptcy Court for the:	DISTRICT OF MARYLA	AND, BALT	IMORE DIVISION			
1	se number						_	if this is an ed filing
St		of Financial	Affairs for Indiv				upplying	4/10
info	rmation. If mo		attach a separate sheet to					
Pa	rt 1: Give De	etails About Your Ma	arital Status and Where Yo	u Lived B	efore			
1.	What is your	current marital statu	s?					
	☐ Married							
	■ Not marr	ied						
2.	During the las	st 3 years, have you	lived anywhere other than	n where yo	u live now?			
	□ No							
	Yes. List	all of the places you li	ved in the last 3 years. Do no	ot include v	here you live now.			
	Debtor 1 Price	or Address:	Dates Debtor there	1 lived	Debtor 2 Prior A	ddress:		tes Debtor 2 ed there
	73 Yardley Baltimore,	Ct MD 21244-8054	From-To: January 20 1 July 2018	17 to	☐ Same as Debtor	1		Same as Debtor 1 m-To:
	5 Otley Ct . Baltimore,	Apt 2A MD 21244-4609	From-To: October 2013-Octob 2016	er	☐ Same as Debtor	1		Same as Debtor 1 m-To:
	es and territorie No Yes. Mak	s include Arizona, Ca	ver live with a spouse or le lifornia, Idaho, Louisiana, N edule H: Your Codebtors (O r Income	evada, Ne	v Mexico, Puerto Ri			
4.	Fill in the total	amount of income yo	nployment or from operati u received from all jobs and nave income that you receive	d all busine	sses, including part	time activities.	alendar yea	ars?
	□ No							
	Yes. Fill i	in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(befo	s income re deductions and sions)	Sources of income Check all that apply.	(be	oss income efore deductions d exclusions)

Official Form 107

Debtor 1 S	tevenson.	Brianna Ale	exandria	Cas	e number (if known)	-	
<u></u>					,,		
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
From Januar the date you			■ Wages, commissions, bonuses, tips	\$9,867.00	☐ Wages, combonuses, tips	missions,	
			☐ Operating a business		☐ Operating a	business	
For last cale (January 1 to		31, 2017)	■ Wages, commissions, bonuses, tips	\$22,282.00	☐ Wages, combonuses, tips	missions,	
			☐ Operating a business		Operating a	business	
■ No	source and the	J	ne from each source separatel	ly. Do not include income that	you listed in line 4.		
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below.		Gross income (before deductions and exclusions)
Part 3: Lis	st Certain Pa	yments You	Made Before You Filed for E	Bankruptcy			
6. Are eithe □ No.	Neither De individual p	ebtor 1 nor D orimarily for a	s debts primarily consumer ebtor 2 has primarily consu- personal, family, or household re you filed for bankruptcy, did	mer debts. Consumer debts purpose."		.S.C. § 101(8	3) as "incurred by an
	□ _{No.} □ _{Yes}	Go to line 7		- t-t- -t #0 405* i		-4 4 4-	
	100	creditor. Do payments to	each creditor to whom you paid onot include payments for dor o an attorney for this bankrupto on 4/01/19 and every 3 years	mestic support obligations, su cy case.	ich as child suppoi	t and alimon	
■ Yes			r both have primarily consure you filed for bankruptcy, did		\$600 or more?	,	
	■ No.	Go to line 7					
	□ Yes		each creditor to whom you paid or domestic support obligations otcy case.				
Credito	's Name and	d Address	Dates of payme		Amount you	Was this p	payment for
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			hanlaunta III.	paid	still owe		
Insiders i which you business	nclude your re are an office	elatives; any g er, director, pe	bankruptcy, did you make a eneral partners; relatives of an rson in control, or owner of 20 ^t rietor. 11 U.S.C. § 101. Include	y general partners; partnership % or more of their voting secu	ps of which you are rities; and any man	a general pa aging agent,	artner; corporations of including one for a
■ No							

_

☐ Yes. List all payments to an insider.

Insider's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Debtor 1 Stevenson, Brianna Alexandri		Case number (if I	known)	
		<u> </u>		
 Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or cos 		yments or transfer any property	on account of a deb	et that benefited an
NoYes. List all payments to an insider				
Insider's Name and Address	Dates of payment	Total amount Amount paid still o		this payment itor's name
Part 4: Identify Legal Actions, Repossession	ons, and Foreclosures			
 Within 1 year before you filed for bankrup List all such matters, including personal injury and contract disputes. 				
□ No				
Yes. Fill in the details. Case title	Nature of the case	Court or agency	Status of the	e case
Case number			_	
First Financial Federal Credit Union v. Brianna Stevenson	Contract	District Court for Baltimo County	ore ☐ Pending ☐ On appe	al
080400228852016		900 Walker Ave Catonsville, MD 21228-53	Conclude	
Jayant Pandya v. Brianna Stevenson 080400208622017	Tort action	District court for Baltimo County 900 Walker Ave Catonsville, MD 21228-53	☐ On appe	
Director, Office of Budget & Finance v. Brianna Stevenson 080400291102018	Contract Case	District Court for Baltimo County 900 Walker Ave Catonsville, MD 21228-53	☐ On appe	
Jeffrey C. Miller, DDS v. Brianna	Contract	District Court for Baltimo	ore	
Stevenson 080400128652018		County 900 Walker Ave	On appe	
		Catonsville, MD 21228-53	Conclude	ed
Rockdale Realty, LLC v. Brianna	Contract Action	District Court for Baltimo	ore	
Stevenson 010100296082017		City 5800 Wabash Ave	On appe	
		Baltimore, MD 21215-333	Conclude	ed
Within 1 year before you filed for bankrup Check all that apply and fill in the details bel		erty repossessed, foreclosed, ga	arnished, attached, s	seized, or levied?
□ No. Go to line 11.■ Yes. Fill in the information below.				
Creditor Name and Address	Describe the Property		Date	Value of the
	Explain what happene	ed		property

Union 1215 York Rd

21093-6207

☐ Property was attached, seized or levied.

Wages Garnished

☐ Property was repossessed.

☐ Property was foreclosed.

■ Property was garnished.

\$300.00

First Financial Federal Credit

Lutherville Timonium, MD

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Del	otor 1 Stevenson, Brianna Alexand	ria	Case number (if known)	
	Creditor Name and Address	Describe the Property	Date	Value of the
		Explain what happened		property
	Jeffrey Miller, DDS/Orthodontics Assoc.	Garnished Wages		\$500.00
	606 Frederick Rd Ste 2	☐ Property was repossessed.		
	Catonsville, MD 21228-4856	☐ Property was foreclosed.		
		Property was garnished.		
		☐ Property was attached, seized or	levied.	
1.	Within 90 days before you filed for bank accounts or refuse to make a payment b		nk or financial institution, set off any a	mounts from your
	Yes. Fill in the details.			
	Creditor Name and Address	Describe the action the creditor to	Dok Date action was taken	Amount
2.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, of the No ☐ Yes		ossession of an assignee for the bene	fit of creditors, a
Par	t 5: List Certain Gifts and Contribution	ıs		
13.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$60 person		al value of more than \$600 per person? Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankr	uptcy, did you give any gifts or contrib	outions with a total value of more than	\$600 to any charity?
	No No			
	Yes. Fill in the details for each gift or co			
	Gifts or contributions to charities that it more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	ŕ	ed Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for bankruptcy,	did you lose anything because of thef	t, fire, other disaster,
	■ No			
	☐ Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for Include the amount that insurance has properties and line are line and line are line and line are line	paid. List pending	Value of property lost
		insurance claims on line 33 of Schedule	<i>А</i> /Б. Ргорепу.	

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

Del	otor 1 Stevenson, Brianna Alexandria		Case n	umber (if known)	
	consulted about seeking bankruptcy or prep Include any attorneys, bankruptcy petition prepar			ired in vour bankruptcv.	
	□ No ■ Yes. Fill in the details.		9		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any property	Date payment or transfer was made	Amount of payment
	Legal Aid Bureau, Inc 29 W Susquehanna Ave Ste 305 Towson, MD 21204-5217	0.00			\$0.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you large No	rs or to make payments		pay or transfer any propert	y to anyone who
	Yes. Fill in the details. Person Who Was Paid Address	Description and v transferred	alue of any property	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mad gifts and transfers that you have already listed or No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you	usiness or financial affai de as security (such as the	e granting of a security integral late of sed pay		
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-prot No □ Yes. Fill in the details.		property to a self-settl	led trust or similar device of	which you are a
	Name of trust	Description and v	alue of the property tra	nsferred	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit I	Boxes, and Storage Uni	its	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	r other financial account	s; certificates of depos	,	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	rear before you filed for l	bankruptcy, any safe de	eposit box or other deposito	ory for securities,
	Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S		be the contents	Do you still have it?

Address (Number, Street, City, State

and ZIP Code)

Case 18-25348 Doc 1 Filed 11/20/18 Page 13 of 52 Stevenson, Brianna Alexandria Case number (if known) Debtor 1 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Nο Yes. Fill in the details. Do you still Name of Storage Facility Describe the contents Who else has or had access have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No П Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Case Title Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

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Det	וטוכ	Stevenson, Brianna Alexandria		ase number (if known)
		☐ A partner in a partnership		
		☐ An officer, director, or managing exe	cutive of a corporation	
		☐ An owner of at least 5% of the voting	or equity securities of a corporation	
		No. None of the above applies. Go to P	art 12.	
		Yes. Check all that apply above and fill	in the details below for each business.	
		siness Name dress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number of ITIN.
				Dates business existed
28.		hin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement to ar	yone about your business? Include all financial
		No		
		Yes. Fill in the details below.		
	Na	me dress	Date Issued	
		mber, Street, City, State and ZIP Code)		
Par	t 12:	Sign Below		
true bank 18 U /s/ Bri	and krup J.S.C Bria	correct. I understand that making a false tcy case can result in fines up to \$250,00 . §§ 152, 1341, 1519, and 3571. anna Alexandria Stevenson a Alexandria Stevenson		eclare under penalty of perjury that the answers are ing money or property by fraud in connection with a oth.
Sig	natu	re of Debtor 1		
Dat	e _	November 20, 2018	Date	
Did : ■ N □ Y	10	attach additional pages to Your Statemer	nt of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
	10		an attorney to help you fill out bankruptcy	

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		Case	10-20	0040 DOCT 1	iieu 11/20/10 17	age 13 01 32			
F	Fill in this	information to identi	fy your	case and this filing:					
Debtor 1		Brianna Alexand	Iria Ste	venson					
		First Name		Middle Name	Last Name				
Debtor 2 (Spouse, if f	filing)	First Name	N	Middle Name	Last Name				
United St	tates Rank	ruptcy Court for the:	DISTR	ICT OF MARYLAND, BAL	TIMORE DIVISION				
Office Of	tates Baril	ruptoy Court for the.	DIOTIC	101 01 107 107 107 107 107 107 107 107 1	TIMONE BIVIOLOTY				
Case nur	mber				_			Check if this is an amended filing	
								amenaca ming	
Officia	al Forr	m 106A/B							
_		_		-					
		A/B: Prop			n asset fits in more than on	a actorony list the a	soot in the	12/15	
think it fits	best. Be a	is complete and accura	ite as pos	sible. If two married people	are filing together, both are top of any additional page	e equally responsible	e for supply	ring correct	
	ery questic		а эсрага	te sheet to this form. On the	top of any additional page.	s, write your name a	iu case iiu	mber (ii known).	
Part 1:	Describe Ea	ch Residence, Building	g, Land, o	r Other Real Estate You Ow	n or Have an Interest In				
1. Do you	own or hav	e any legal or equitable	e interest	in any residence, building,	land, or similar property?				
		, , , ,		,,	······				
_	Go to Part 2								
□ res.	where is tr	ne property?							
Part 2:	Describe Yo	our Vehicles							
□ No ■ Yes									
		d -				Do not deduct se	oured claim	s or exemptions. Put	
		onda ccord		th		the amount of an	o not deduct secured claims or exemptions. Put e amount of any secured claims on Schedule D: reditors Who Have Claims Secured by Property.		
		114		■ Debtor 1 only □ Debtor 2 only		Current value of		Current value of the	
	proximate r		3000	Debtor 1 and Debtor 2	only	entire property?		ortion you own?	
Ot	her informat	tion:		At least one of the debt	ors and another				
				Check if this is comm (see instructions)	unity property	\$8,52	3.00	\$0.00	
					les, other vehicles, and a				
■ No									
☐ Yes									
5 Add t	he dollar v	value of the portion v	ou own	for all of your entries fro	om Part 2, including any	entries for pages			
							L	\$0.00	
Dart 2	Josepha Va	our Personal and Hous	ahald Ita-	ne					
				ns rest in any of the followi	ng items?		Cu	rrent value of the	
								rtion you own? not deduct secured	
								ms or exemptions.	

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1	Stevenson,	Brianna Alexandria Case number (if known)	
■ Yes.	Describe	Beds, Chairs, desk, lamps, sofas, dining room table, curtains, rugs, pots, and pans, microwave	\$2,400.00
		Microwave	\$50.00
□No	<i>les:</i> Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music colle phones, cameras, media players, games	ctions; electronic devices
		Televisions	\$1,100.00
		Stereo & DVD player	\$240.00
Example ■ No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or nemorabilia, collectibles	baseball card collections; other
Example No	les: Sports, photo- instruments	nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools; musical
■ No		s, shotguns, ammunition, and related equipment	
11. Clothe <i>Exam</i> ☐ No		othes, furs, leather coats, designer wear, shoes, accessories	
■ Yes.	Describe	Blouses, shoes, jackets, sweaters, socks, pants, uniforms, etc	\$2,140.00
□ No [′]	•	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	silver
		Earrings, necklaces, watches, etc.	\$1,600.00
Exam _i ■ No □ Yes. 14. Any ot ■ No	arm animals ples: Dogs, cats, l Describe ther personal and	d household items you did not already list, including any health aids you did not list	
		of all of your entries from Part 3, including any entries for pages you have attached for nber here	\$7,530.00

Part 4: Describe Your Financial Assets

Official Form 106A/B Schedule A/B: Property page 2

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De	ebtor 1	Stevenson, B	rianna <i>i</i>	Alexandria		Case number (if known)	
Do	you ow	vn or have any leç	gal or equ	itable interest in any o	f the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No		·	wallet, in your home, in a	·	and when you file your petition	
17.	Examp				ertificates of deposit; shares the same institution, list eac Institution name:	s in credit unions, brokerage hous ch.	ses, and other similar
	_ 100		17.1.	Checking Account	Wells Fargo Bank		\$63.00
18.	Examp ■ No	, mutual funds, or oles: Bond funds, ir	nvestment		e firms, money market accou	ints	
	Non-pu joint v ■ No	ublicly traded stoo enture	rmation al	cerests in incorporated cout theme of entity:	and unincorporated busin	nesses, including an interest i % of ownership:	n an LLC, partnership, and
	Negoti Non-ne ■ No	<i>iable instrument</i> s in	nclude per nts are tho mation abo	sonal checks, cashiers' o se you cannot transfer to	and non-negotiable instructions and non-negotiable instructions and the commence of the comme	nd money orders.	
21.	Examp ■ No	nent or pension a oles: Interests in IR	A, ERISA separately		thrift savings accounts, or Institution name:	other pension or profit-sharing p	olans
22.	Your sl Examp ☐ No		repaymer deposits y	nts ou have made so that you	u may continue service or us	telecommunications companies	or others
			Secur Renta	ty Deposit on Unit	Landlord - Mount Wa	ashington Group	\$795.00
	■ No □ Yes Interest 26 U.S.0	lss	uer name	and description. n account in a qualified	u, either for life or for a numb	per of years) r a qualified state tuition progr	ram.
	■ No □ Yes	Inst	titution na	me and description. Sepa	arately file the records of any	/ interests.11 U.S.C. § 521(c):	
	■ No	equitable or futu Give specific infor			nan anything listed in line	1), and rights or powers exerc	cisable for your benefit

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1 Stevenson, Brianna Alexandria Case number (if known)

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

27. Licenses, franchises, and other general intangibles		Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No	
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No		☐ Yes. Give specific information about them	
Yes. Give specific information about them Money or property owed to you? Current value of the portion you own?		Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
Don not deduct secured claims or exemptions.		· · · ·	
Do not deduct secured claims or exemptions. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years	Мс	oney or property owed to you?	Current value of the
No			Do not deduct secured
29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim Any financial assets you did not already list No Yes. Give specific information.		_	
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes, Give specific information		☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years	
Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim		Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property se	ttlement
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 1. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 2. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 3. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim			
Yes. Give specific information 31. Interests in insurance policies		Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation unpaid loans you made to someone else	n, Social Security benefits;
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 44. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim			
Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Surrender or refund value: Surrender or refund value:		Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information		_	
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim		Company name: Beneficiary:	
 Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for 	32.	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive proceeds	operty because someone has
33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim			
Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim		☐ Yes. Give specific information	
 Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for 		Examples: Accidents, employment disputes, insurance claims, or rights to sue	
No ☐ Yes. Describe each claim			
35. Any financial assets you did not already list No Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for			off claims
No Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for		☐ Yes. Describe each claim	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for			
LOEO UU		☐ Yes. Give specific information	
	36		\$858.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

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Debto	Stevenson, Brianna Alexandria		Case number (if known)	
37. Do	you own or have any legal or equitable interest in any business-relate	d property?		
■ N	o. Go to Part 6.			
ПΥ	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You	Own or Hove on Intersec	∮ le	
rait 0.	If you own or have an interest in farmland, list it in Part 1.	Own or have an interes	L III.	
46. Do	you own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53 Do	you have other property of any kind you did not already list?			
E	xamples: Season tickets, country club membership			
•	Yes. Give specific information			¢700.00
	Garnished wages			\$700.00
54. A	dd the dollar value of all of your entries from Part 7. Write tha	t number here		\$700.00
Part 8:	List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2			\$0.00
56. F	Part 2: Total vehicles, line 5	\$0.00		
57. F	art 3: Total personal and household items, line 15	\$7,530.00		
58. F	Part 4: Total financial assets, line 36	\$858.00		
59. F	Part 5: Total business-related property, line 45	\$0.00		
60. F	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	art 7: Total other property not listed, line 54 +	\$700.00		
62. T	otal personal property. Add lines 56 through 61	\$9,088.00	Copy personal property total	\$9,088.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$9,088.00

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1	Brianna Alexand	ria Stevenson		
	First Name	Middle Name	Last Name)
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAI	ND, BALTIMORE DIVISION	
Case number				
if known)				☐ Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.		
Beds, Chairs, desk, lamps, sofas, dining room table, curtains, rugs,	\$2,400.00		Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
pots, and pans, microwave Line from Schedule A/B 6.1		■ 100% of fair market value, up to any applicable statutory limit		
Microwave Line from Schedule A/B: 6.2	\$50.00		Md. Code Ann., Cts. & Jud.	
Line from Schedule A/B. 0.2		■ 100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(1)	
Televisions	\$1,100.00		Md. Code Ann., Cts. & Jud.	
Line from Schedule A/B. 7.1		■ 100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(1)	
Stereo & DVD player	\$240.00		Md. Code Ann., Cts. & Jud.	
Line from Schedule A/B. 7.2		■ 100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(b)(5)	
Blouses, shoes, jackets, sweaters,	\$2,140.00		Md. Code Ann., Cts. & Jud.	
socks, pants, uniforms, etc Line from Schedule A/B. 11.1		100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(1)	

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Earrings, necklaces, watches, etc.	\$1,600.00			Md. Code Ann., Cts. & Jud.
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(1)
	Wells Fargo Bank	\$63.00	\$63.00 □		Md. Code Ann., Cts. & Jud.
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(b)(5)
	Landlord - Mount Washington Group	\$795.00			Md. Code Ann., Cts. & Jud.
	Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(b)(5)
	Garnished wages	\$700.00			Md. Code Ann., Cts. & Jud.
	Line from Schedule A/B: 53.1			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(b)(5)
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 years)			on or after the date of adjustment.)	
	■ No				
	☐ Yes. Did you acquire the property covered	by the exemption within	1,21	5 days before you filed this case?	
□ No					

☐ Yes

	Cas	e 18-25348 Doc 1 Filed 11/20	1/18 Page 22	01 52	
Fill in this	information to iden	tify your case:			
Debtor 1	Brianna Alexan	dria Stevenson			
	First Name	Middle Name Last Name)	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	kruptcy Court for the:	DISTRICT OF MARYLAND, BALTIMORE DIV	/ISION		
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
Official Form	106D				
Schedule [D: Creditors	Who Have Claims Secured	by Propert	V	12/15
			<u> </u>		
		If two married people are filing together, both are equ t, number the entries, and attach it to this form. On th			
1. Do any creditors h	ave claims secured by	your property?			
☐ No. Check t	his box and submit th	is form to the court with your other schedules. You	have nothing else to rep	port on this form.	
Yes. Fill in a	all of the information b	elow.			
Part 1: List All	Secured Claims				
		nore than one secured claim, list the creditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Westlake S	Service Inc.	Describe the property that secures the claim:	\$21,069.00	\$8,523.00	\$12,546.00
Creditor's Name		2014 Honda Accord			
4751 Wilsh	nire Blvd Ste				
100		As of the date you file, the claim is: Check all that apply.			
Los Angelo 90010-3847		Contingent			
	City, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only ■ Debtor 2 only		An agreement you made (such as mortgage or sector loan)	ured		
Debtor 1 and Deb	ntor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla		☐ Other (including a right to offset)			
community deb	t				
Date debt was incur	rred	Last 4 digits of account number 997			
	-	umn A on this page. Write that number here:	\$21,069	.00	
If this is the last pag Write that number h		e dollar value totals from all pages.	\$21,069	.00	
		r a Debt That You Already Listed			
Part 2: List Other	sia to be Notified to	a Debt That Tou Alleady Listed			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	dsc 10-23340 Doc 1 Tiled 11/20/10 18	age 20 of 52
Fill in this information to identi	fy your case:	
Debtor 1 Brianna Alex	xandria Stevenson	
First Name	Middle Name Last Name	 }
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name	
United States Bankruptcy Court for	the: DISTRICT OF MARYLAND, BALTIMORE DIVISION	
Case number		
(if known)		☐ Check if this is an
		amended filing
Official Form 106E/F		
	s Who Have Unsecured Claims	12/15
	ole. Use Part 1 for creditors with PRIORITY claims and Part 2 for credit	
Schedule G: Executory Contracts and D: Creditors Who Have Claims Secured the Continuation Page to this page. If y case number (if known).	eases that could result in a claim. Also list executory contracts on So Unexpired Leases (Official Form 106G). Do not include any creditors v I by Property. If more space is needed, copy the Part you need, fill it o you have no information to report in a Part, do not file that Part. On the	vith partially secured claims that are listed in Schedule ut, number the entries in the boxes on the left. Attach
Part 1: List All of Your PRIORIT	Y Unsecured Claims	
Do any creditors have priority uns —	ecured claims against you?	
■ No. Go to Part 2.		
Yes.		
Part 2: List All of Your NONPR	ORITY Unsecured Claims	
3. Do any creditors have nonpriority	unsecured claims against you?	
☐ No. You have nothing to report in	this part. Submit this form to the court with your other schedules.	
Yes.		
unsecured claim, list the creditor sep	ared claims in the alphabetical order of the creditor who holds each claimarately for each claim. For each claim listed, identify what type of claim it is claim, list the other creditors in Part 3.If you have more than three nonpriorit	s. Do not list claims already included in Part 1. If more
		Total claim
4.1 Baltimore Gas & Elect	ric Last 4 digits of account number 1404	\$1,085.00
Nonpriority Creditor's Name	Miles was the debt in sum 40	
PO Box 1475	When was the debt incurred?	
Baltimore, MD 21203-1	475	
Number Street City State Zlp C		at apply
Who incurred the debt? Chec	k one.	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors a		
☐ Check if this claim is for a	community	
debt Is the claim subject to offset?	Obligations arising out of a separation agreeme report as priority claims	nt or divorce that you did not
■ No	☐ Debts to pension or profit-sharing plans, and ot	ner similar debts
Yes	■ Other. Specify	

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Debto	Stevenson, Brianna Alexandria	Case number (if know)	
4.2	Credit Systems International Nonpriority Creditor's Name	Last 4 digits of account number 0436	\$36.00
	Nonphonty Creditor's Name	When was the debt incurred?	
	1277 Country Club Ln Fort Worth, TX 76112-2304 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Credit Systems International Nonpriority Creditor's Name	Last 4 digits of account number 1049	\$47.00
		When was the debt incurred?	
	1277 Country Club Ln Fort Worth, TX 76112-2304 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Dir. Off. of Budget & Finance Nonpriority Creditor's Name	Last 4 digits of account number	\$115.00
	Nonpholity Orealton's Name	When was the debt incurred?	
	400 Washington Ave Rm 150 Towson, MD 21204-4605		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No	_	
	Yes	Other, Specify	

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Debtor	1 Stevenson, Brianna Alexandria		Case number (if know)	
4.5	FingerHut/WebBank Nonpriority Creditor's Name	Last 4 digits of account number	5244	\$385.00
	Nonpholity Cleditor's Name	When was the debt incurred?		
	6250 Ridgewood Rd Saint Cloud, MN 56303-0820 Number Street City State Zlp Code Who incurred the debt? Check one.	- As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	\square Check if this claim is for a community	Student loans		
	debt		ation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing	a plane, and other similar debte	
	Yes	Other. Specify		
4.6	First Financial Federal Credit Nonpriority Creditor's Name	Last 4 digits of account number	7030	\$1,371.00
	,	When was the debt incurred?		
	1215 York Rd			
	Timonium, MD 21093-6207 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	, 10 01 1110 uuto , 011 1110, 1110 011111 11	onesit an mat apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separ	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify		
4.7	Jayant Pandya Nonpriority Creditor's Name	Last 4 digits of account number		\$5,000.00
	Nonpholity Creditor's Name	When was the debt incurred?		
	1125 Kingsbury Rd Owings Mills, MD 21117-1315			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	_			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	claim:	
	At least one of the debtors and another	Student loans	Ciaiii.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other, Specify		

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Debto	Stevenson, Brianna Alexandria		Case number (f know)					
4.8	LVNV Funding Inc Nonpriority Creditor's Name	Last 4 digits of account number	7705	\$792.00				
	PO Box 1269	When was the debt incurred?						
	Greenville, SC 29602-1269 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	I claim: ration agreement or divorce that you did not					
	■ No □ Yes	Debts to pension or profit-sharin	•					
	Li res	Other. Specify						
4.9	LVNV Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	3250	\$706.00				
	PO Box 1269 Greenville, SC 29602-1269 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim i						
	Debtor 2 only	only						
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans						
	Is the claim subject to offset?	report as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify						
4.10	Maryland Vehicle Administration Nonpriority Creditor's Name	Last 4 digits of account number	9273	\$2,758.00				
	PO Box 2278 Glen Burnie, MD 21060-4278	When was the debt incurred?	08/22/2018					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only							
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims	-					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other Specify						

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Debtor	1 Stevenson, Brianna Alexandria	Case number (f know)					
4.11	Morgan Properties	Last 4 digits of account number		\$5,739.50			
	Nonpriority Creditor's Name	When was the debt incurred?					
=	160 Clubhouse Rd King of Prussia, PA 19406-3300 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes	report as priority claims Debts to pension or profit-sharin	ration agreement or divorce that you did not				
4.12	National Credit Corporation Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00				
_	5503 Cherokee Ave Alexandria, VA 22312-2307 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim i					
	■ Debtor 1 only						
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims					
	■ No □ Yes	□ Debts to pension or profit-sharin■ Other. Specify					
	Orthodontic Associates Nonpriority Creditor's Name	Last 4 digits of account number	3751	\$2,083.35			
	606 Frederick Rd Ste 2 Catonsville, MD 21228-4856	When was the debt incurred?	02/05/2018				
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only						
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	Disputed	d alaims				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin					
	■ No	Debts to perision or profit-sharm	א אינווים, מווע טנוופו אווווומו עפטנא				

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Debto	Stevenson, Brianna Alexandria	Case number (f know)	
4.14	Receivable Management Systems Nonpriority Creditor's Name	Last 4 digits of account number	\$172.00
	Nonphonty Creditor's Name	When was the debt incurred?	
	7206 Hull Street Rd Ste 211 Richmond, VA 23235-5826 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		_	
	Yes	Other. Specify	
4.15	Rockdale Realty LLC	Last 4 digits of account number	\$1,252.72
	Nonpriority Creditor's Name	When was the debt incurred? 05/21/2018	
	PO Box 4944	Wildin was the dest induited: 03/21/2010	
	Lutherville Timonium, MD 21094-4944		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.16	Transworld Systems Inc	Last 4 digits of account number	\$92.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 15270 Wilmington, DE 19850-5270		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	_	
	00	Other. Specify	

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Debtor	1 Stevenson, Brianna Alexandria	Case number (f know)	
4.17	US Dept. of Education/Glelsi Nonpriority Creditor's Name	Last 4 digits of account number 6679	\$3,610.00
		When was the debt incurred?	_
	PO Box 7860 Madison, WI 53707-7860		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes		
	☐ Yes	Other. Specify	-
4.18	Verizon	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name		
	1095 Avenue of the Americas	When was the debt incurred?	_
	New York, NY 10036-6797		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt	_ ````	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	
			-
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed	
is tryi have ı	ng to collect from you for a debt you owe to	l about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For examp someone else, list the original creditor in Parts 1 or 2, then list the collection agency nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have add or submit this page.	here. Similarly, if you
	nd Address E. Friedman, Esquire	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.13 of (Check one):	ima
	grad, Hess, Friedman & Levitt,	Part 2: Creditors with Nonpriority Unsecured Cla	
LLC		- Part 2. Creditors with Nonphority Onsecured	Cidillis
	edland Ct Ste 212		
Owing	gs Mills, MD 21117-3292	Last 4 digits of account number 3751	
Name a	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Capita		Line 4.9 of (Check one):	ims
	ox 30285	■ Part 2: Creditors with Nonpriority Unsecured	Claims
Sait L	ake City, UT 84130-0285	Last 4 digits of account number 3250	
Name a	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Comc	ast	Line 4.12 of (Check one):	ims
	John F Kennedy Blvd	■ Part 2: Creditors with Nonpriority Unsecured	Claims
rniiac	lelphia, PA 19103-2838	Last 4 digits of account number	
Name a	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
0		2 s j ii die 1 die 2 die 7 die 110 original oroditor.	

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Credit One Bank PO Box 98875 Last Vegas, NV 89193-8875 Last 4 digits of account number T705 Name and Address Daphne Sollon, Esquire 4.00 Washington Ave Rm 150 Towson, MD 21204-4605 Name and Address David Carlin, Esquire 30 E Padonia Rd Ste 400 Timonium, MD 21093-2310 Name and Address David Carlin, Esquire 30 E Padonia Rd Ste 400 Timonium, MD 21093-2310 Name and Address David Carlin, Esquire 30 E Padonia Rd Ste 400 Timonium, MD 21093-2310 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number T030 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Part 1: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority U	Debtor 1 Stevenson, Brianna Alexandria		Case number (if know)
Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims	Credit One Bank	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Name and Address Daphne Sollon, Esquire 4.00 Washington Ave Rm 150 Towson, MD 21204-4605 Name and Address Daphne Sollon, Esquire 4.00 Washington Ave Rm 150 Towson, MD 21204-4605 Name and Address Name and Address Name and Address Name and Address Name and Address Name and Address Name and Address Name and Address 1. William Chase, Esquire Chase, Chase, & Hammerschlag 1190 W Northern Pkwy Apt 124 Baltimore, MD 21210-1467 Name and Address Name and Address Name and Address Name and Address Name and Address Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Township Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 7030 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 1404 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 8 Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor?			Part 2: Creditors with Nonpriority Unsecured Claims
Daphne Sollon, Esquire 400 Washington Ave Rm 150 Towson, MD 21204-4605 Name and Address David Carlin, Esquire 30 E Padonia Rd Ste 400 Timonium, MD 21093-2310 Name and Address Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.15 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with	Las vegas, NV 89193-8875	Last 4 digits of account number	7705
A00 Washington Ave Rm 150 Towson, MD 21204-4605 Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number			
Towson, MD 21204-4605 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? David Carlin, Esquire 30 E Padonia Rd Ste 400 Timonium, MD 21093-2310 Name and Address Name and Address I. William Chase, Esquire Chase, Chase, & Hammerschlag 1190 W Northern Pkwy Apt 124 Baltimore, MD 21210-1467 Name and Address National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Name and Address National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Name and Address Name and Address Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 7030 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 1404 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 1404 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 1404 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 1404 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 0888			
Name and Address David Carlin, Esquire 30 E Padonia Rd Ste 400 Timonium, MD 21093-2310 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Last 4 digits of account number Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 3: Creditor			■ Part 2: Creditors with Nonpriority Unsecured Claims
David Carlin, Esquire 30 E Padonia Rd Ste 400 Timonium, MD 21093-2310 Name and Address Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Last 4 digits of account number 1404 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	·	Last 4 digits of account number	
30 E Padonia Rd Ste 400 Timonium, MD 21093-2310 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 1404 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 0888			
Name and Address I. William Chase, Esquire Chase, Chase, & Hammerschlag 1190 W Northern Pkwy Apt 124 Baltimore, MD 21210-1467 Name and Address National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Name and Address Name and Address Northern First 5000 Cox Rd Glen Allen, VA 23060-9263 Name and Address Northern First Source A.1 of (Check one): Dart 1 or Part 2 did you list the original creditor? Last 4 digits of account number To30 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Dart 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 1404 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?			
Name and Address I. William Chase, Esquire Chase, Chase, & Hammerschlag 1190 W Northern Pkwy Apt 124 Baltimore, MD 21210-1467 Name and Address National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Name and Address Pat 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 7030 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Last 4 digits of account number 1404 Name and Address Patient First Souo Cox Rd Glen Allen, VA 23060-9263 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Last 4 digits of account number 1404 Name and Address Patient First Souo Cox Rd Glen Allen, VA 23060-9263 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?			■ Part 2: Creditors with Nonpriority Unsecured Claims
Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 3: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 3: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: 1: Creditors with Nonpriority Unsecured Claims Part 5: Creditors with Nonpriority Unsecured Claims Part 5: Creditors with Nonpriority Unsecured Claims Part 6: Creditors with Nonpriority Unsecured Claims Part 7: Creditors with Nonpriority Unsecured Claims Part 8: Creditors with Nonpriority Unsecured Claims Part 9: Creditors with Nonpriority Unsecured Claims	,	Last 4 digits of account number	
Chase, Chase, & Hammerschlag 1190 W Northern Pkwy Apt 124 Baltimore, MD 21210-1467 Last 4 digits of account number 7030 Name and Address National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Name and Address Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Last 4 digits of account number 1404 Name and Address Patient First Source Con which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?		On which entry in Part 1 or Part 2 did yo	ou list the original creditor?
1190 W Northern Pkwy Apt 124 Baltimore, MD 21210-1467 Last 4 digits of account number 7030 Name and Address National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Name and Address Name and Address Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one): Part 2: Creditors with Priority Unsecured Claims Last 4 digits of account number 1404 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Fart 2: Creditors with Priority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 2: Creditors with Priority Unsecured Claims Fart 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor?		Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Name and Address National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Name and Address Name and Address Last 4 digits of account number Part 2: Creditors with Priority Unsecured Claims Last 4 digits of account number 1404 Name and Address Patient First Source Consumer Source Line 4.14 of (Check one): Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Found Cox Rd Glen Allen, VA 23060-9263 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	1190 W Northern Pkwy Apt 124		Part 2: Creditors with Nonpriority Unsecured Claims
National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Last 4 digits of account number Name and Address Patient First 5000 Cox Rd Glen Allen, VA 23060-9263 Name and Address Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	Baltimore, MD 21210-1467	Last 4 digits of account number	7030
National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036 Last 4 digits of account number Name and Address Patient First 5000 Cox Rd Glen Allen, VA 23060-9263 Name and Address Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	Name and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?
Harrisburg, PA 17111-1036 Last 4 digits of account number 1404 Name and Address Patient First Part 2: Creditors with Nonpriority Unsecured Claims 5000 Cox Rd Glen Allen, VA 23060-9263 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?		Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Name and Address Patient First 5000 Cox Rd Glen Allen, VA 23060-9263 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?			■ Part 2: Creditors with Nonpriority Unsecured Claims
Patient First 5000 Cox Rd Glen Allen, VA 23060-9263 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor?	Tid. 1000	Last 4 digits of account number	1404
5000 Cox Rd Glen Allen, VA 23060-9263 Last 4 digits of account number 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	Name and Address		
Glen Allen, VA 23060-9263 Last 4 digits of account number 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?			
Last 4 digits of account number 0888 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?			■ Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number	0888
FIGURE 1 P. 1	Randall Emergency Physicians		Part 1: Creditors with Priority Unsecured Claims
Fandallstown, MD 21133-5103			■ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number 0565	,	Last 4 digits of account number	0565

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	04	Otershand In our	04	Total Claim
T. (.)	6f.	Student loans	6f.	\$ 3,610.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	J	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 23,134.57
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 26,744.57

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Fill in th	is information to identi	fy your case:			
Debtor 1	Brianna Alexand	ria Stevenson			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAI	ND, BALTIMORE DIVISION		
Case number _					
(if known)				[Check if this is
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

Mount Washington Group 4813 Seton Dr Ste 101 Baltimore, MD 21215-3211 **Housing Lease Agreement**

Case 18-25348 Doc 1 Filed 11/20/18 Page 32 of 52

Fil	I in this information to identi	fv vour case:			
Debtor 1					
Debiori	Brianna Alexand First Name	Middle Name	Last Name		
Debtor 2	ng) First Name	Middle Name	Last Name		
(Spouse if, filin					
United Stat	tes Bankruptcy Court for the:	DISTRICT OF MARYLA	ND, BALTIMORE DIVIS	SION	
Case numb	oer				☐ Check if this is an
()					amended filing
O((; ;)	40011				Ç
	Form 106H				
<u>Sched</u>	ule H: Your Cod	ebtors			12/15
	er (if known). Answer every o		o not list either spouse as	s a codebtor.	
Californ	nin the last 8 years, have you nia, Idaho, Louisiana, Nevada, Go to line 3. . Did your spouse, former spou	New Mexico, Puerto Rico,	Texas, Washington, an		states and territories include Arizona,
line 2 a	again as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	you have listed the c	with you. List the person shown in reditor on Schedule D (Official Form le E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	ne
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lin	ne.
	Name			☐ Schedule E/F, ☐ Schedule G, lir	line
	Number Street			_	
(City	State	ZIP Code		

Official Form 106H Software Copyright (c) 2018 CINGroup - www.cincompass.com

Fill	in this information to identify your	case:							
		lexandria Stevenson							
1 -	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	ne: DISTRICT OF MARY	LAND, BALTIMORE D	DIVISION	_				
	se number nown)					Check if this is: An amended A suppleme income as o	nt showi		chapter 13
0	fficial Form 106l					MM / DD/ Y		3	
S	chedule I: Your Inc	come							12/15
sup spo atta	as complete and accurate as posphyling correct information. If you are separated and you have a separated and you have a separate sheet to this form The second beautiful as a separate sheet to this form the second beautiful as a separate sheet to this form the second beautiful as a separate sheet to this form the second beautiful as a second beautif	u are married and not filin our spouse is not filing wit . On the top of any additio	g jointly, and your s h you, do not includ	pouse is e informa	livir atior	g with you, includ about your spous	e inforr se. If mo	nation about your present on the contract of t	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-	-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed		☐ Emplo	☐ Employed			
		Employment status	☐ Not employed		☐ Not er	☐ Not employed			
	employers.	Occupation	Care Associate						
	Include part-time, seasonal, or self-employed work.	Employer's name	Charlestown Co	ommun	ity				
	Occupation may include studen homemaker, if it applies.	t or Employer's address	711 Maiden Cho Catonsville, MD		363	2			
		How long employed th	nere? 3 mont	hs					
Par	t 2: Give Details About M	onthly Income							
	mate monthly income as of the ss you are separated.	date you file this form. If y	ou have nothing to rep	ort for an	y line	, write \$0 in the spa	ce. Inclu	ude your non-filir	ng spouse
If yo	u or your non-filing spouse have m ce, attach a separate sheet to this f	ore than one employer, comborm.	oine the information for	r all emplo	oyers	for that person on t	he lines	below. If you ne	ed more
						For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, saideductions). If not paid monthly,			2.	\$	1,606.22	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$	0.00	+\$_	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	1,606.22	\$	N/A	

Case 18-25348 Doc 1 Filed 11/20/18 Page 34 of 52

Debtor	Stevenson, Brianna Alexandria	_	Case r	number (if known)			
			For	Debtor 1	For Debtor		
C	Copy line 4 here	4.	\$	1,606.22	\$	N/A	
_				,			
5. L	ist all payroll deductions:						
	a. Tax, Medicare, and Social Security deductions	5a.	\$	179.27	\$	N/A	
	b. Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	c. Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	e. Insurance	5e. 5f.	\$	0.00	\$	N/A	
_	f. Domestic support obligations g. Union dues	5g.	* *	0.00	\$ \$	N/A N/A	
	h. Other deductions. Specify: 401 K	5h.+	· : —	7.30	+ \$	N/A N/A	
3	Garnishment	_ 511.1	<u>\$</u> —	167.57	΄ \$	N/A	
C A			Ψ—		·		
	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	³	354.14	\$	N/A	
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,252.08	\$	N/A	
	ist all other income regularly received: a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
8	b. Interest and dividends	8b.	<u> </u>	0.00	\$	N/A	
_	c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
Q	d. Unemployment compensation	8d.	\$ _	0.00	\$	N/A N/A	
_	e. Social Security	8e.	*—	0.00	\$	N/A	
	f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
8	g. Pension or retirement income	— 8g.	\$	0.00	\$	N/A	
8	h. Other monthly income. Specify:	8h.+	\$		+ \$	N/A	
9. A	add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
	calculate monthly income. Add line 7 + line 9. add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1	,252.08 + \$_	N/A	= \$1,252.0	80
Ir O D	state all other regular contributions to the expenses that you list in Schedule solutions from an unmarried partner, members of your household, your dether friends or relatives. No not include any amounts already included in lines 2-10 or amounts that are not available:	penden		•		+\$0.0	00
	add the amount in the last column of line 10 to the amount in line 11. The result of the that amount on the Summary of Schedules and Statistical Summary of Certain			•	40	\$1,252.0)8
13.	o you expect an increase or decrease within the year after you file this form? No. Yes. Explain:	,				Combined monthly income	•

Fill	in this information to identify you	ur case:						
		andria Stevenson		Check	if this is:			
200	Dilailia Alex	andria Stevenson			an amended filing			
Deb	tor 2				supplement show	ing postpetition chapter 13		
(Spo	ouse, if filing)			е	expenses as of the f	following date:		
Unit	ed States Bankruptcy Court for the:	DISTRICT OF MARYLAND, BALT DIVISION	IMORE	<u> </u>	MM / DD / YYYY			
Cas	e number							
(If kı	nown)							
Of	fficial Form 106J							
So	chedule J: Your E	xpenses				12/15		
info		oossible. If two married people are ded, attach another sheet to this fo n.						
Par 1.	Is this a joint case?	old						
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in	a a separate household?						
	□ No							
	☐ Yes. Debtor 2 must	t file Official Form 106J-2, Expenses f	for Separate Househo	old of Debtor 2	2.			
2.	Do you have dependents?	□No						
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?		
	Do not state the					□ No		
	dependents names.		son		4	■ Yes □ No		
			Step brother		31	□ No ■ Yes		
					· · · · · · · · · · · · · · · · · · ·	□ No		
			Daughter		9 mths	■ Yes		
						□ No		
						☐ Yes		
3.	Do your expenses include	■ No						
	expenses of people other the yourself and your dependen							
D - "	Fathwata Varm On make	a Mandala Fanana						
Est exp	t 2: Estimate Your Ongoin imate your expenses as of you penses as of a date after the ballicable date.	g monthly Expenses ur bankruptcy filing date unless yo ankruptcy is filed. If this is a supple	ou are using this form emental Schedule J,	n as a supp check the b	lement in a Chapt ox at the top of th	er 13 case to report ne form and fill in the		
valu	• •	on-cash government assistance if ye included it on Schedule I: Your I	•		Your expe	enses		
(Oil	1101ai 1 01111 1001.)				- Jan Jak			
4.	The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.		4. \$		795.00			
	If not included in line 4:							
	4a. Real estate taxes			4a. \$		0.00		
	4b. Property, homeowner's,	or renter's insurance		4b. \$		15.00		
	4c. Home maintenance, rep	pair, and upkeep expenses		4c. \$		0.00		
_		on or condominium dues		4d. \$		0.00		
5.	Additional mortgage paymer	nts for your residence, such as hom	ne equity loans	5. \$		0.00		

tor 1	Stevenson, Brianna Alexandria	Case numb	er (if known)	
Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	182.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	391.00
6d.	Other. Specify:	6d.		0.00
	and housekeeping supplies	7.	·	200.00
	Icare and children's education costs		\$	660.00
	ning, laundry, and dry cleaning		\$	200.00
	onal care products and services	10.		0.00
	cal and dental expenses	11.	\$	0.00
	sportation. Include gas, maintenance, bus or train fare.	12.	¢	120.00
	ot include car payments.		·	
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	itable contributions and religious donations	14.	\$	0.00
Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20.	45-	¢.	
	Life insurance	15a.	·	0.00
	Health insurance	15b.	:	0.00
	Vehicle insurance	15c.	·	514.00
	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec	•	16.	\$	0.00
	Ilment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	587.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
Your	payments of alimony, maintenance, and support that you did not repo	ort as		
	cted from your pay on line 5, Schedule I, Your Income (Official Form 10		\$	0.00
Othe	r payments you make to support others who do not live with you.	•	\$	0.00
Spec	ify:	19.		
Othe	r real property expenses not included in lines 4 or 5 of this form or on	Schedule I: Your	Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
		21.	·	
ome	r: Specify:	Z1.	тф	0.00
Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	3,664.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 100	6J-2	\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	2 664 00
220.	nuu iirie 22a ariu 22b. Trie resuit is your monthiy expenses.		Ψ	3,664.00
Calc	ulate your monthly net income.	·		
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,252.08
23b.		23b.		3,664.00
	1,,, , . ,		<u> </u>	0,007.00
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	-2,411.92
For ex	ou expect an increase or decrease in your expenses within the year aft tample, do you expect to finish paying for your car loan within the year or do you expectation to the terms of your mortgage?			ise or decrease because o
_	, 0			
■ No				
	es. Explain here:			

Schedule J: Your Expenses

page 2

Official Form 106J

Fill in this in	formation to identify ye	our case:			
Debtor 1	Brianna Alexand	ria Stevenson			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF MARYLA	ND, BALTIMORE DIVISION	N .	
Case number					☐ Check if this is an amended filing
You must file this	form whenever you fi	le bankruptcy schedules on connection with a bankr		aking a false statem	ent, concealing property, or or imprisonment for up to 20
Sign	n Below				
■ No	or agree to pay some	one who is NOT an attorn	ey to help you fill out ban	Attach <i>Bank</i>	rruptcy Petition Preparer's Notice, and Signature (Official Form 119)
that they are	ty of perjury, I declare true and correct. Inna Alexandria Ste		nary and schedules filed v	vith this declaration	and
	a Alexandria Stever e of Debtor 1	nson	Signature of D	Debtor 2	
Date N	November 20, 2018		Date		

Case 18-25348 Doc 1 Filed 11/20/18 Page 38 of 52

	O	date 10-23040 Doc 1 Tiled 11/20/10 Tage 30 01 32		
	Fill in this information to	identify your case:		
Debt	tor 1 Brianna Ale	exandria Stevenson		
Debt	First Name	Middle Name Last Name		
1	rse if, filing) First Name	Middle Name Last Name		
Unite	ed States Bankruptcy Court for	the: DISTRICT OF MARYLAND, BALTIMORE DIVISION		
Case	e number			
(if kno	own)		_	eck if this is an
			am	ended filing
Oπ,	isial Farms 4000			
	icial Form 106Sur			40/45
		ets and Liabilities and Certain Statistical Information ossible. If two married people are filing together, both are equally responsible for s	upplvir	12/15
infor	mation. Fill out all of your sch	hedules first; then complete the information on this form. If you are filing amended out a new Summary and check the box at the top of this page.		
Part	1: Summarize Your Assets	s		
				r assets e of what you own
1.	Schedule A/B: Property (Office	icial Form 106A/B)		
	1a. Copy line 55, Total real es	state, from Schedule A/B	\$_	0.00
	1b. Copy line 62, Total person	nal property, from Schedule A/B	\$_	9,088.00
	1c. Copy line 63, Total of all p	roperty on Schedule A/B	\$_	9,088.00
Part	2: Summarize Your Liabili	ities		
			You	r liabilities
				unt you owe
		ave Claims Secured by Property (Official Form 106D)	\$	21,069.00
		n Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	Ψ_	21,000.00
		Have Unsecured Claims (Official Form 106E/F) n Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from	n Part 2 (nonpriority unsecured claims) from line 6j d3chedule E/F	\$	26,744.57
		· · · · · · · · · · · · · · · · · · ·		20,7 44.07
		Your total liabilities	\$	47,813.57
		l		_
Part	3: Summarize Your Incom	ne and Expenses		
	Schedule I: Your Income(Office		ф.	1,252.08
	Copy your combined monthly	income from line 12 oSchedule I	\$ _	1,232.00
	Schedule J: Your Expenses (C Copy your monthly expenses fr	Official Form 106J) rom line 22c of <i>Schedule J</i>	\$	3,664.00
Part	4: Answer These Question	ns for Administrative and Statistical Records		
		y under Chapters 7, 11, or 13?		
6.		eport on this part of the form. Check this box and submit this form to the court with your oth	ner sche	edules.
	■ Yes			
7.	What kind of debt do you ha	ve?		
	■ Your debts are primarily	y consumer debts. Consumer debts are those "incurred by an individual primarily for a pe	ersonal.	family, or household
		1(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	,	•
	☐ Your debts are not prim	narily consumer debts. You have nothing to report on this part of the form. Check this bo.	x and sı	ubmit this form to the

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

court with your other schedules.

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Debtor 1 Stevenson, Brianna Alexandria

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,332.04

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,610.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,610.00

Baltimore Gas & Electric PO Box 1475 Baltimore, MD 21203-1475

Brian E. Friedman, Esquire Winegrad, Hess, Friedman & Levitt, LLC 400 Redland Ct Ste 212 Owings Mills, MD 21117-3292

Capital One PO Box 30285 Salt Lake City, UT 84130-0285

Comcast 1701 John F Kennedy Blvd Philadelphia, PA 19103-2838

Credit One Bank PO Box 98875 Las Vegas, NV 89193-8875

Credit Systems International 1277 Country Club Ln Fort Worth, TX 76112-2304

Daphne Sollon, Esquire 400 Washington Ave Rm 150 Towson, MD 21204-4605 David Carlin, Esquire 30 E Padonia Rd Ste 400 Timonium, MD 21093-2310

Dir. Off. of Budget & Finance 400 Washington Ave Rm 150 Towson, MD 21204-4605

FingerHut/WebBank 6250 Ridgewood Rd Saint Cloud, MN 56303-0820

First Financial Federal Credit 1215 York Rd Timonium, MD 21093-6207

I. William Chase, Esquire Chase, Chase, & Hammerschlag 1190 W Northern Pkwy Apt 124 Baltimore, MD 21210-1467

Jayant Pandya 1125 Kingsbury Rd Owings Mills, MD 21117-1315

LVNV Funding Inc PO Box 1269 Greenville, SC 29602-1269 LVNV Funding LLC PO Box 1269 Greenville, SC 29602-1269

Maryland Vehicle Administration PO Box 2278 Glen Burnie, MD 21060-4278

Morgan Properties 160 Clubhouse Rd King of Prussia, PA 19406-3300

Mount Washington Group 4813 Seton Dr Ste 101 Baltimore, MD 21215-3211

National Credit Corporation 5503 Cherokee Ave Alexandria, VA 22312-2307

National Recovery Agency 2491 Paxton St Harrisburg, PA 17111-1036

Orthodontic Associates 606 Frederick Rd Ste 2 Catonsville, MD 21228-4856 Patient First 5000 Cox Rd Glen Allen, VA 23060-9263

Randall Emergency Physicians 5401 Old Court Rd Randallstown, MD 21133-5103

Receivable Management Systems 7206 Hull Street Rd Ste 211 Richmond, VA 23235-5826

Rockdale Realty LLC PO Box 4944 Lutherville Timonium, MD 21094-4944

Transworld Systems Inc PO Box 15270 Wilmington, DE 19850-5270

US Dept. of Education/Glelsi PO Box 7860 Madison, WI 53707-7860

Verizon 1095 Avenue of the Americas New York, NY 10036-6797 Westlake Service Inc. 4751 Wilshire Blvd Ste 100 Los Angeles, CA 90010-3847

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United States Bankruptcy Court District of Maryland, Baltimore Division

IN RE:		Case No.
Stevenson, Brianna Alexandria		Chapter 7
·	Debtor(s)	
	VERIFICATION OF CREDITOR MATR	ИX
The above named debtor(s) hereby vo	erify(ies) that the attached matrix listing creditor	s is true to the best of my(our) knowledge.
Date: November 20, 2018	Signature: /s/ Brianna Alexandria Stevenson	
	Brianna Alexandria Stevenson	Debtor
Date:	Signature:	
		Joint Debtor, if any

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this inf	ormation to identify your case:						
				ieck one 2A-1Su		rected in this form and	I in Form
Debtor 1	Brianna Alexandria Stevenson				``		
Debtor 2 (Spouse, if filing)	, ·			■ 1. TI	nere is no presi	umption of abuse	
-	s Bankruptcy Court for the: District of Maryland,	Baltimore Div	ision	☐ 2. TI	ne calculation to	o determine if a presur	nption of abuse
Officed States	S Bankruptcy Court for the. District or Maryland,	Baillillore Div	151011			nade under <i>Chapter 7 N</i>	leans Test
Case numbe	er				,	cial Form 122A-2).	
(ii kilowii)						does not apply now bed ut it could apply later.	ause of qualified
				☐ Che	eck if this is a	n amended filing	
Official	Form 122A - 1					•	
Chapte	r 7 Statement of Your Curr	ent Mor	nthly Inc	ome)		12/15
a separate she number (if kno military servic	e and accurate as possible. If two married people are set to this form. Include the line number to which the swn). If you believe that you are exempted from a prese, complete and file Statement of Exemption from Proceed	additional infor sumption of abo	mation applies. use because yo	On the	top of any additi have primarily	onal pages, write your i	name and case ause of qualifying
1. What is	s your marital and filing status? Check one only.						
■ Not	married. Fill out Column A, lines 2-11.						
☐ Mar	ried and your spouse is filing with you. Fill out b	ooth Columns	A and B, lines 2	2-11.			
☐ Mar	ried and your spouse is NOT filing with you. Yo	u and your s	pouse are:				
□Li	iving in the same household and are not legally	separated. F	ill out both Colu	ımns A	and B, lines 2-	11.	
р	iving separately or are legally separated. Fill out penalty of perjury that you and your spouse are legall apart for reasons that do not include evading the Mea	ly separated un	nder nonbankru	ptcy law	that applies or		
101(10A). F 6 months, a	average monthly income that you received from all so For example, if you are filing on September 15, the 6-mon add the income for all 6 months and divide the total by 6. The rental property, put the income from that property in o	th period would Fill in the result.	be March 1 throu Do not include a	ıgh Augu ny incom	ust 31. If the amount more to	unt of your monthly incom han once. For example, if	ne varied during the
				Colum Debto		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, an deductions).	d commissior	ns (before all	\$	1,332.04	\$	
3. Alimon	y and maintenance payments. Do not include pa B is filled in.	yments from a	a spouse if	\$	0.00	\$	
of you from an roomma	ounts from any source which are regularly paid or your dependents, including child support. In unmarried partner, members of your household, you ates. Include regular contributions from a spouse coinclude payments you listed on line 3	clude regular	contributions	n. \$	0.00	\$	
5. Net inc	ome from operating a business, profession, or						
0	and the form all deducations	\$ 0.00	otor 1				
	eceipts (before all deductions) y and necessary operating expenses	-\$ 0.00					
	nthly income from a business, profession, or farm		Copy here ->	\$	0.00	\$	
	ome from rental and other real property	*					
			otor 1				
Gross r	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00	0	•	0.00	•	
Net mo	nthly income from rental or other real property	\$0.00	Copy here ->		0.00	\$	
7. Interes	t, dividends, and royalties			\$	0.00	Ψ	

Official Form 122A-1

Debtor 1	Stevenson,	Brianna	Alexandria

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	pouse	Ì
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:	eceived was a benefit ur	nder the					
	For you \$ For your spouse \$	0.0	00_					
	, , , , , , , , , , , , , , , , , , , ,							l
	Pension or retirement income. Do not include any amounder the Social Security Act.			\$	0.00	\$,
10.	Income from all other sources not listed above. Spenot include any benefits received under the Social Securia victim of a war crime, a crime against humanity, or inter If necessary, list other sources on a separate page and p	ty Act or payments rece national or domestic ter	ived as					
	•		_	\$	0.00	\$		
			_	\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add lin each column. Then add the total for Column A to the to		\$1	1,332.04	+ \$		= \$	1,332.04
							Total c	urrent monthly
Part	2: Determine Whether the Means Test Applies to	You					mcome	'
	Calculate your current monthly income for the year.							
	12a. Copy your total current monthly income from line 1			Conv	line 11 h	oro->	\$	1,332.04
	12a. Copy your total current monthly income from line			Сору	iiiie i i ii	616-2	*	1,332.04
	Multiply by 12 (the number of months in a year)						x 1	
	12b. The result is your annual income for this part of the	form				12b.	\$1	5,984.48
13.	Calculate the median family income that applies to y	ou. Follow these steps:					L	
	Fill in the state in which you live.	MD						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy of	online using the link sp	ecified ir	n the separate	e instructio	13. ons for this	\$ <u>11</u>	5,771.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, che	eck box	1T,here is no p	resumptio	n of abuse.		
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 27,	he presu	ımption of abı	ıse is dete	ermined by Fo	rm 122A-	2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury the	nat the information on th	is statem	nent and in an	y attachm	ents is true an	d correct	
	X /s/ Brianna Alexandria Stevenson							
	Brianna Alexandria Stevenson							
	Signature of Debtor 1							
	Date November 20, 2018 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Forn	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fi	ile it with this form.						

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Printed Name(s) of Debtor(s)

Case No. (if known) ____

United States Bankruptcy Court District of Maryland, Baltimore Division

IN RE:	Case No
Stevenson, Brianna Alexandria	Chapter 7
Debtor(s)	
	CE TO CONSUMER DEBTOR(S) HE BANKRUPTCY CODE
Certificate of [Non-Attorney	y] Bankruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing the deb notice, as required by § 342(b) of the Bankruptcy Code.	tor's petition, hereby certify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X	(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal, repartner whose Social Security number is provided above.	sponsible person, or
Certificate	e of the Debtor
I (We), the debtor(s), affirm that I (we) have received and read th	e attached notice, as required by § 342(b) of the Bankruptcy Code.
Stevenson, Brianna Alexandria	X /s/ Brianna Alexandria Stevenson 11/20/2018

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Debtor

Signature of Joint Debtor (if any)

Date

Date